

ECS Configuration Change Request

Page 1 of 4 Pages

CCR No. 96-0954	Logged Date 8/15/96	Rev. -	Request Type CCR
Priority Routine <input checked="" type="checkbox"/> Urgent <input type="checkbox"/> Emergency <input type="checkbox"/>	Affected Release A1	Change Class II	
Title (description) FOS Release A RTM Update - Part 5 Add New Release A Level 4 Submnemonic Requirements for Command Subsystem			
Documents Affected		Source Nos (RID, NCR, Action Item, GSFC CCR, etc.) or Tech Reference Cindi Adams - NASA FOS System Engineer AC-96-0437	
RTM Change <input checked="" type="checkbox"/> Start New Baseline <input type="checkbox"/>			
Problem Level 4 Requirements need to be added to specify providing submnemonics for discrete states (up to 8) and reverse EU per 3rd order polynomial.			
Proposed Solution Modify design of Command subsystem to accommodate submnemonics that require reverse EU calculation to binary bit patter (discrete state processing is already in current design). Modify Level 4 Requirements accordingly (Attachment 1 - Add new L4 requirement; Attachment 2 - Add RBR/L4 Link; Attachment 3 - Add FOS Test Class Link to Level 4; Attachment 4 - Add Component Class Link to L4)			
Impact Analysis: Organizations Affected: BOO <input type="checkbox"/> Contracts <input type="checkbox"/> ESO <input type="checkbox"/> FOS <input checked="" type="checkbox"/> M&O <input type="checkbox"/> QA <input type="checkbox"/> Rel. A <input type="checkbox"/> Rel. B <input type="checkbox"/> Rel. IR1 <input type="checkbox"/> MRS <input type="checkbox"/> SMO <input type="checkbox"/> Subconts <input type="checkbox"/> A.1 <input type="checkbox"/> Other _____ Cost: None <input checked="" type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> (Not exceeding \$100,000) (\$100,000 to \$500,000) (Over \$500,000) Schedule: None <input checked="" type="checkbox"/> Other _____ Additional LOC _____ Man-Months _____ Materials _____			
Originator <u>Andy Miller</u> (signed) <u>Andy Miller</u> 8/14/96 Signature _____ Date _____			
Office <u>FOS</u> Office Manager (signed) <u>Debbie Dunn</u> 8/14/96 Signature _____ Date _____			
Disposition Approved <input checked="" type="checkbox"/> Approved w/Comment <input type="checkbox"/> Forward <input type="checkbox"/> Disapproved <input type="checkbox"/> Comments: CCB Chairperson (signed) <u>R. E. Clinard</u> 8/23/96 Signature _____ Date _____			